



April 18, 2006

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CERTIFICATE OF NEED PROGRAM
DEPARTMENT OF HEALTH

Janis Sigman, Manager
Certificate of Need Program
Department of Health
PO Box 47852
Olympia, WA 98504-7852

Dear Ms. Sigman:

In accordance with WAC 246-310-080, Evergreen Hospital Medical Center (Evergreen) hereby submits a letter of intent proposing to amend Certificate of Need (CN) #1290. Specifically, Evergreen requests that the condition placed on CN #1290 be removed. This condition requires that any bed authorization not meeting licensing requirements by January 31, 2007 be forfeited. In conformance with WAC, the following information is provided:

A Description of the Extent of Services Proposed:

CN #1290 approved the removal of a condition issued on CN #991. The original condition limited the use of 15 new acute care beds to hospice only. With approval of CN #1290 on July 28, 2004, Evergreen was granted approval to use the 15 beds for general medical/surgical care. Evergreen does not propose any change in service or scope but requests that, with the proposed amendment application, the January 31, 2007 requirement be removed.

Estimated Cost of the Proposed Project:

There is no change to the capital expenditure associated with relocating the beds into the hospital, previously estimated at \$1,224,544.

Description of the Service Area:

There is no change in the service area proposed with the amendment. Evergreen's service area includes portions of east King and southeast Snohomish Counties.

Thank you for your interest in this matter. Please feel free to contact me at 425-899-2507 or Trisha West, Director of Planning, Market Research & Regulatory Affairs, at 425-899-2642 with any questions.

Sincerely,

David S. Danielson, Senior Vice President
Operations

